

CVR-Inovia Vein
Appendix to HCMO-1

Section 2: Contact Information for the Parties

Party A – CVR Management, LLC

Tax ID	████████
Phone	████████
Cell Phone	████████
Email	████████████████████

Party B – Inovia, LLC

Tax ID	████████
Phone	████████
Cell Phone	████████
Email	████████████████

Party C – Center for Vein Restoration (OR), LLC

Tax ID	████████
Phone	████████
Cell Phone	████████
Email	████████████████████

Section 4: Billing Contact for Payment of Review Fees

Cell Phone	████████
Email	████████████████████

Section 6(d)

CVR and Center for Vein Restoration (OR), LLC will acquire the non-clinical assets and clinical assets, respectively, of Inovia Vein for a purchase price up to, but not to exceed, ██████████.

Section 11(f)

- vii. Annual number people served in Oregon, for all business, not just business related to transaction – ██████████
- viii. Annual number of services provided in Oregon – ██████████